

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			9-25-01
<b>FORMALITY REVIEW</b>			JAN 12 2002
<b>RESPONSE FORMALITY REVIEW</b>			

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	51		101	
50		52		102	
49		53		103	
48		54		104	
47		55		105	
46		56		106	
45		57		107	
44		58		108	
43		59		109	
42		60		110	
41		61		111	
40		62		112	
39		63		113	
38		64		114	
37		65		115	
36		66		116	
35		67		117	
34		68		118	
33		69		119	
32		70		120	
31		71		121	
30		72		122	
29		73		123	
28		74		124	
27		75		125	
26		76		126	
25		77		127	
24		78		128	
23		79		129	
22		80		130	
21		81		131	
20		82		132	
19		83		133	
18		84		134	
17		85		135	
16		86		136	
15		87		137	
14		88		138	
13		89		139	
12		90		140	
11		91		141	
10		92		142	
9		93		143	
8		94		144	
7		95		145	
6		96		146	
5		97		147	
4		98		148	
3		99		149	
2		100		150	
1					
0					

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)